

(GW/UST-2) Site Investigation Report For Permanent Closure or Change-in-Service of U.S.T.**FOR
TANKS
IN
NC****Return Completed Form To:**The appropriate DEM Regional Office according to the county of the facility's location.
[SEE MAP ON REVERSE SIDE OF OWNER'S COPY (PINK) FOR REGIONAL
OFFICE ADDRESS].State Use **NC** Dept. of EHNR

I.D. Number

Date Received **OCT 26 1993****INSTRUCTIONS**

Complete and return within (30) days following completion of site investigation.

Regional Office**I. Ownership of Tank(s)****NC-Division of Forest Resources**Owner Name (Corporation, Individual, Public Agency, or Other Entity)
P. O. Box 27687Street Address
WakeCounty
Raleigh, NC 27611City State Zip Code
919-733-2162

Area Code Telephone Number

II. Location of Tank(s)**NC-DFR - Region II, District 10 Office**Facility Name or Company
0-021805

Facility ID # (if available)

Route 16, Box 272 (Hargrave Road)

Street Address or State Road

Davidson Lexington 27292County City Zip Code
704-956-2111

Area Code Telephone Number

III. Contact Person**Patrick Harris****NC-DFR Construction Specialist****919-553-6178**

Name

Job Title

Telephone No. (Area Code)

Closure Contractor **Evergreen Environmental Services, Box 1926, Kernersville, NC 17285 919-996-0181**

(Name)

(Address)

Telephone No. (Area Code)

Lab **Froehling & Robertson, Inc. 310 Hubert St., Raleigh, NC 27603 919-828-3441**

(Name)

(Address)

Telephone No. (Area Code)

IV. U.S.T. Information**V. Excavation Condition****VI. Additional Information Required**

Tank No.	Size in Gallons	Tank Dimensions	Last Contents	Water in Excavation		Free Product		Notable Odor or Visible Soil Contamination	
				Yes	No	Yes	No	Yes	No
1	1,000	3.75' ϕ x 12'	diesel		x		x		x
2	3,000	5.5' ϕ x 18'	gasoline		x		x		x
3	1,000	4.0' ϕ x 10'	fuel oil		x		x		x

See reverse side of pink copy (owner's copy) for additional information required by N.C. - DEM in the written report and sketch.

VII. Check List

Check the activities completed.

- ☒ Contact local fire marshal
- ☒ Notify DEM Regional Office before abandonment.
- ☒ Drain & flush piping into tank.
- ☐ Remove all product and residuals from tank
- ☒ Excavate down to tank.
- ☒ Clean and inspect tank.
- ☒ Remove drop tube, fill pipe, gauge pipe, vapor recovery tank connections, submersible pumps and other tank fixtures.
- ☒ Cap or plug all lines except the vent and fill lines.
- ☒ Purge tank of all product & flammable vapors.
- ☒ Cut one or more large holes in the tanks.
- ☒ Backfill the area.

Date Tank(s) Permanently closed: **8/30/93**

Date of Change-in-Service: _____

ABANDONMENT IN PLACE

- ☐ Fill tank until material overflows tank opening;
- ☐ Plug or cap all openings;
- ☐ Disconnect and cap or remove vent line
- ☐ Solid inert material used - specify: _____

REMOVAL

- ☒ Create vent hole
 - ☒ Label tank
 - ☒ Dispose of tank in approved manner
- Final tank destination: **Safeway Tank Disposal**
Colfax, NC

VIII. Certification (Read and Sign)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete.

Print name and official title of owner or owner's authorized representative
Daniel K. Schaefer, P.E., Project Engineer
Froehling & Robertson, Inc.

Signature

Daniel K. Schaefer

Date Signed

10/4/93